No Use of glasses or contact lenses Type											Purpose				
VISUAL ACUITY											VISUAL FIELDS				
Unaided					Aided						Norn		Norma	al I	Defective
Right eye					t eye Left e				nocular	•	Right eye				
Distant 6/9	619	9 619		Distant 6/6		61	6	6	616		Left eye		V		
Near ~	ear ~ ~		~		Near				~						
COLOUR VISION	(Please t	ick)		,		C	LINICA	L FI			TMT to be	don	e if BMI >2		
Type of Test (Plea		W	MA	-		H	leight (c	m)	17	70	Weight (kg)	78		* 2B,
						_	ulse rat				72				ULAR
Not tested Normal Doubtful Defe				ective				od Pressure systolic nalysis: Glucose:					Diastolic		NIC
HEARING		-									- , , , ,		V/ L	Dioou.	,,,,
Pure tone and audiometry		ry (threshold values in		dB)				Sp		Spee	peech and Whisper		r Test (metres)		
	*		1,000 Hz		2,000 Hz		3,000 Hz				620	Normal	Whisper		
Right ear	V		V	~		2	V	V		Right ear		V	1	~	
Left ear		~		V		~	11	V		Left e	ar		V		
	3.11.11	Normal	Abnormal		356		Norm		Abnorr	mal			. 9	Normal	Abnorma
Head		V	4	Eye m	ovement		✓			Н	ernia			\checkmark	
Sinus, nose, throat		✓		Lungs and chest		٧			Α	Anus (not rctal ex		am)	\checkmark		
Mouth / teeth / oral cavity		V		Breast examination N		n NIA				G	G-U system			V	
Ears (general)		· •	ij.	Heart		3 ²	V			U	Upper and lower		200	✓	
Tympanic membrane		~		Skin	V z		V	V		Spine (C/C,		T/S, L	JS)	~	
Eyes		V.	5.	Varicos	se Vein	e Vein		V		N	Neurologic (full/brie		ief)	V	
Ophthalmoscopy		V		Vascula		ar (inc. pedal pulse		V		P	Psychiatric			~	
Pupils		V	Abdome			nen and viscera			General appo		earar	nce	V		
Part C – Investig		JD (ab)	· · · · · · · ·		D ()								(()		
Hepatitis B +1		HB (ab)	+ve •	-ve HI		+ve	-ve S	piro	metry				Medin		
Bacteriological stool test *2		not performed		negative positive			Normal			With Findl	ina	MAN MAN			
Parasiticalstool test +3 ECG +4		not per	The state of the s	negative positive				Normal Vitil Finding					-		
1 required by the Compa	ny for all cre			- 3			U	SG	Abdon	nen		36		0	
·2 required by the Company for all food handlers ·3 required by the Company for all food handlers from tropical clim ·4 compulsory				ates			M	Normal With Findling						A	
Blood			esult	Normal			С	Creatine Test					aAH	de	
Blood		15.2	am	s/dl	/dl 13.5 – 18.0 gms/dl			Normal			With Findling		CUR ME	01,000	
		11.7	9111			3	/ul No	orma				٠.	001 000		7
Hemoglobin		8,600		nm 4	4000 – 1000		ım ING					1	10000		
Hemoglobin Total WBC count			cells / cu.r	mm 4	-		ım P		nancy	Test	2.M	B. C	6.0 cha		
Hemoglobin Total WBC count ESR Blood Stgar (FBS)		8,600 12 122.0	cells / <u>cu.r</u>		Uį	00 / <u>cu.m</u>	ım P	regn	N	Test /A	With Find	B.;	o.S.che		
Hemoglobin Total WBC count ESR Blood Stgar (FBS)		8,600 12 122.0 -NE	cells / <u>cu.r</u> r	mm g/dl	Uį	00 / <u>cu.m</u> p to 15m	ım P		N	Test /A	With Findli	ng g'	e. Che		
Hemoglobin Total WBC count ESR Blood Stgar (FBS) HIV *2 (+ve or -ve)		8,600 12 122·0 -NE NON-R	cells / <u>cu.r</u> mg	mm g/dl	Uį	00 / <u>cu.m</u> p to 15m	m P	regr	N		With Findli	ng g	e. ch		
Hemoglobin Total WBC count ESR Blood Stgar (FBS) HIV *2 (+ve or -ve)		8,600 12 122.0 -NE	cells / <u>cu.r</u> mg	mm g/dl	Uį	00 / <u>cu.m</u> p to 15m	nm P /dl No	regn	ey Test		,		199		
Hemoglobin Total WBC count ESR Blood Stgar (FBS) HIV *2 (+ve or -ve) VDRL Others Blood Group		8,600 12 122.0 -NE NON-R	Cells / Cu.r mg	mm g/dl v∈.	Uį	00 / <u>cu.m</u> p to 15m	nm P /dl No	regr	ey Test		With Findli		23		
Hemoglobin Total WBC count ESR Blood Sugar (FBS) HIV *2 (+ve or -ve) VDRL Others Blood Group sessment of Fitn In the basis of the s	ess for s	8,6co 12 122.0 -VE NON-R NOW service at s	ea: (pleaseclaration	mm g/dl ve.	U _I 80 –	00 / <u>cu.m</u> p to 15m 140 mg.	m P //dl No K	orma	ey Test	t e	,		Catering Service		ner vice
Hemoglobin Total WBC count ESR Blood Sugar (FBS) HIV *2 (+ve or -ve) VDRL Others Blood Group sessment of Fitn In the basis of the s	ess for seafarer's	9,600 12 122.0 -NE NON-R NOW service at s personal d d above, 10	ea: (pleaseclaration	mm g/dl ve.	U _I 80 –	00 / <u>cu.m</u> p to 15m 140 mg.	m P No	orma	ey Test	t e	With Findli		Catering		ner
Hemoglobin Total WBC count ESR Blood Sugar (FBS) HIV *2 (+ve or -ve) VDRL Others Blood Group seessment of Fitn in the basis of the segnostic test result if for look out du visual aid require	ess for seeafarer's se recorde	Y,600 12 122.0 -VE NON-R NON-R service at s personal d d above, I c	ea: (pleaseclaration declare the	mm g/dl ve tick) e tick) e seafareduty	U _I 80 –	00 / <u>cu.m</u> p to 15m 140 mg.	m P //dl No K	idne	ey Test	t e	With Findli		Catering		ner
Blood Hemoglobin Total WBC count ESR Blood Sugar (FBS) HIV *2 (+ve or -ve) VDRL Others Blood Group seessment of Fitn the basis of the sagnostic test result Visual aid require Without restrictio	ess for seeafarer's se recorde	12 122.0 -VE NON-R NON-R Service at s personal d d above, I Unfit fo Visual	ea: (pleaseclaration declare the	mm g/dl ve tick) e tick) e seafareduty	U _I 80 –	00 / <u>cu.m</u> p to 15m 140 mg.	m P /dl No K	idne	Deck Service	TER.	With Findli Engine Service	ng	Catering Service	sei	ner
Hemoglobin Total WBC count ESR Blood Sugar (FBS) HIV *2 (+ve or -ve) VDRL Others Blood Group seessment of Fitn in the basis of the segnostic test result if for look out du visual aid require	ess for s eafarer's s recorde uty ed ns	2,6co 12 122.0 -VE NON-R Service at s personal d d above, I Unfit fo Visual With re	ea: (please eclaration declare the aid not recestrictions	mm g/dl ve. re tick) my cline seafanduty quired	U _l 80 – nical examir er medically	00 / <u>cu.m</u> p to 15m 140 mg.	m P /dl No K	idne	Deck Service	TER.	With Findli Engine Service	ng	Catering	sei	ner
Hemoglobin Total WBC count ESR Blood Stigar (FBS) HIV *2 (+ve or -ve) VDRL Others Blood Group sessment of Fitn in the basis of the signostic test result Fit for look out du Wisual aid require	ess for s eafarer's s recorde uty ed ns	2,6co 12 122.0 -VE NON-R Service at s personal d d above, I Unfit fo Visual With re	ea: (please eclaration declare the aid not recestrictions	mm g/dl ve. re tick) my cline seafanduty quired	U _l 80 – nical examir er medically	00 / <u>cu.m</u> p to 15m 140 mg.	m P /dl No K	idne	Deck Service	TER.	With Findli Engine Service	ng	Catering Service	sei	ner

VALID FOR TWO YEARS

Date of Issue

Signature of Medical Practitioner

DR. MD. AYUBUR RAHMAN

M.B.S.: P.G.T (Medicine)

Taher Chamber

10 Medical Certificate shall remain valid for a maximum period of two years unless the seafarer is under the age of 18 or sailing on a Japanese Flag vessel, in which case the maximum period of validity shall be one year.